



Gerd Auffarth

Germany considers solutions for an ageing population

Stefanie Petrou Binder MD

HOW do you provide quality ophthalmic care to an increasing number of patients while on a shrinking budget? German eye care professionals are coming up with solutions to some of the problems lurking on that country's horizon.

"Today's industrialised nations are seeing an increasingly aged population with markedly rising age-related health needs. In the ophthalmic arena, these include age-related macular degeneration (AMD), cataract, and glaucoma, to name but a few. The onslaught of eye diseases in Germany needs attention on both the local and national level," said Frank Holz MD, director of the Bonn University Eye Clinic, Bonn, Germany.

German research institutes are currently conducting research that will help answer some vital questions with regard to the healthcare system, its pressing needs, and its deficits. Germany needs to come up with solutions so that patients receive the best its physicians can offer. While money may be a limiting factor, a balance needs to be found so that ophthalmic patients continue to get proper care, he said.

"The ophthalmology department in Heidelberg is doing what it can to catch up and prepare itself for the already increasing number of ageing patients with age-related eye diseases," said Gerd Auffarth MD who is chief-assistant medical director and deputy director of the Heidelberg University Eye Clinic, Heidelberg, Germany, as well as secretary of the German-speaking Society of Intraocular Lens Implantation, Interventional and Refractive Surgery (DGII).

The Heidelberg University Eye Clinic built a new ambulatory cataract surgical unit that has allowed surgeons to provide cover for many more patients. Cataract surgeries in Heidelberg have already increased roughly by 15 per cent within the past year. Dr Auffarth feels that the unit will be able to take on the increasing numbers of cataract patients in the future as well.

The problem, Dr Auffarth says, lies with the hospital administration, which tries to cut costs by reducing the numbers of doctors and staff, and by budgeting expenditures. To cover more costs with the same budget means spreading it out as far as possible, which gets tricky when patient numbers rise and the number of treatments increase, he said.

"On a national level, one of the big problems is that no money gets invested for medical education and to educate specialists. The profession is continuously losing popularity among high school graduates. What we really need are more specialists on the job to take care of the rising numbers of patients," Dr Auffarth observed.

He noted that the Heidelberg University

Clinic would be able to treat increasing numbers of patients as long as funding stayed the same. On a reduced budget, he predicted problems.

Health insurers also budget their patients in terms of which ophthalmic procedures they cover in their healthcare plans. In the private sector, for instance, once a surgeon has performed a certain number of cataract surgeries within an allotted time period, his quota is filled, and any additional surgeries remain unpaid. Surgeons therefore put off surgeries to the next payable time frame, creating waiting lists for cataract patients.

But putting off surgeries will not make them go away. German surgeons perform 600,000 cataract surgeries per year. If these numbers continue to increase, waiting periods for patients may increase by many months. Dr Auffarth said that the system needed to find the capacity to operate on cataracts, without long waits or doctors being unpaid.

He said that cataract patients may find themselves paying for surgery themselves, at least in-part, as the health budget may not be able to cover it entirely, as with glasses, contact lenses, dental care, and other health services.

"The truth is that the healthcare system in Germany really cannot afford the growth because money is usually not added to the healthcare budget, but just redistributed. In light of the currently growing German economy, however, we hope to see some of that income flow into healthcare," Dr Auffarth maintained.

Demographic destiny – more patients, less money

In spite of a spark in economic growth, a large proportion of the German population will be retired within the next decade. With new population growth low, the number of working people paying into the healthcare system will be wanting. Meanwhile AMD, cataract and glaucoma are on the rise.

Thanks to the intense ophthalmic research carried out in Germany, second only to the US, several key developments are helping eye doctors deal with the higher load of ageing patients. Optical coherence tomography (OCT), for instance, allows ophthalmologists to see a large number of patients within a very short time, Dr Auffarth noted. It helps define AMD as wet or dry and allows the physician to initiate a treatment strategy.

"AMD patients are increasing steadily, as substantiated through our clogged waiting rooms, with patients waiting for Avastin treatments. Although not generally covered in general healthcare plans, patients come up with the money for OCT and Avastin themselves. What we are working on now is making Avastin therapy more affordable for the vast numbers of people who need it. We are working on approving the drug, which is

currently still used off-label," he noted.

Not all procedures are included in the university budget, he explained. Increasing the ophthalmology budget is only possible through reducing other departmental budgets, whose costs are surely rising, as well.

A further diagnostic tool that is being implemented to help doctors cope with the increasing numbers of glaucoma patients is HRT. It is vital to early glaucoma screening and getting patients on track before retinal damage sets in.

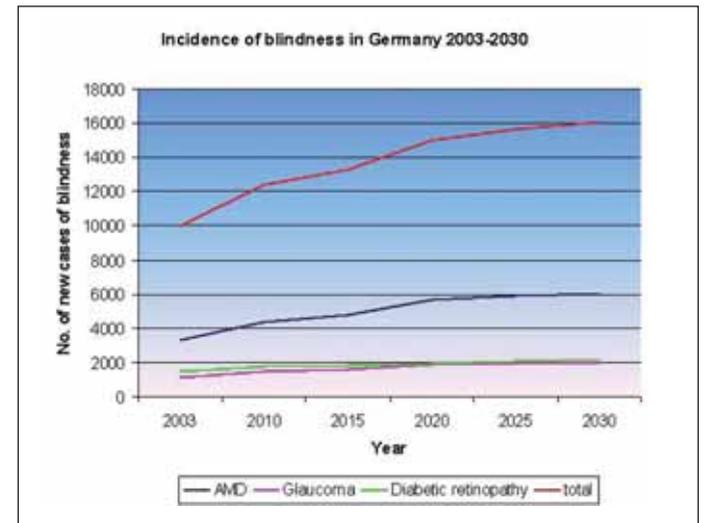
"These are some of the measures we are taking in Heidelberg, but this problem has to be addressed on both the national and international level, as Germany is not alone in its ageing patient demographics," Dr Auffarth contended.

"Germany is not particularly prepared for the onslaught of eye diseases. At the moment the DOG is performing research to establish the magnitude of the problem"

Norbert Pfeiffer MD

The European Vision Institute, an affiliation of European university eye clinics collaborating in clinical research according to high international standards, was formed to aid in the development of devices and techniques in ophthalmology. Interestingly, out of the 14 countries comprising the institute, the majority are German clinics, specifically those in Bonn, Freiburg, Hamburg, Leipzig, Mainz, Mannheim, München, and Tübingen.

Cooperative efforts have crossed both international and interdisciplinary borders. In fact, the Mainz University Departments of Ophthalmology and Internal Medicine have joined forces for a large preventive clinical investigation, 'PREVENT-It – The Gutenberg Heart and Eye Study'. The investigation is to include 16,300 inhabitants from the city of Mainz and its surrounding areas within the ages of 35-74 years. The participants will undergo ophthalmic and medical



Courtesy of Norbert Pfeiffer MD

examinations and will be followed until 2016.

Participating eye doctors hope to discover insights into the prevalence of certain eye diseases. The interdisciplinary effort should lead to a better understanding of the risk factors common to age-related eye diseases and cardiovascular diseases, and physicians hope to establish reliable methods for early diagnostics and treatment strategies, in affected patients.

"Germany is not particularly prepared for the onslaught of eye diseases. At the moment the DOG (German Ophthalmology Society) is performing research to establish the magnitude of the problem. We will then address politicians and present them with the evidence. To help gather more evidence, the Department of Ophthalmology at Mainz University is conducting a very large population survey to establish the prevalence and incidence of major age-related eye diseases such as AMD, glaucoma and diabetic retinopathy," said Norbert Pfeiffer MD, who is the director of the Mainz University Eye Clinic, Mainz, Germany.

Once these numbers are known, the German healthcare providers will have a better understanding of just how prepared Germany is to cope with the patient/doctor ratio and the associated health costs, he said.

Dr Pfeiffer said it was unlikely that the health budget would continue to be able to carry its current full load, particularly in view of the rapidly growing incidence of age-related eye diseases. Healthcare budgets are linked to the income of the German population, thus only growth will help support the situation, he observed.

The increase of age-related eye diseases is, of course, not only a German issue, since almost all populations in Europe are ageing, as are almost all other populations in the world, Dr Pfeiffer said.

frank.holz@ukb.uni-bonn.de

pfeiffer@Augen.klinik.uni-mainz.de

walther@Augen.klinik.uni-mainz.de

gerd_auffarth@med.uni-heidelberg.de